

# **APPLICATION DATA SHEET**

## **Application Information**

<b>Application Number::</b>	Not Yet Assigned
<b>Filing Date::</b>	August 28, 2003
<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested Classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	
<b>Number of CD Disks::</b>	
<b>Number of Copies of CDs::</b>	
<b>Sequence Submission?::</b>	
<b>Computer Readable Form (CFR)?::</b>	
<b>Number of Copies of CFR::</b>	
<b>Title::</b>	TRANSMISSION DEVICE FOR A TWO DIMENSIONAL IMAGE DISPLAY MODULE TO PROGRAMMABLY DISPLAY AN IMAGE IN THE MODULE
<b>Attorney Docket Number::</b>	33144-192426
<b>Request for Early Publication?::</b>	
<b>Request for Non-Publication?::</b>	
<b>Suggested Drawing Figure::</b>	Figs. 1-5
<b>Total Drawing Sheets::</b>	5
<b>Small Entity?::</b>	Yes
<b>Latin Name::</b>	
<b>Variety Denomination Name::</b>	
<b>Petition Included?::</b>	
<b>Petition Type::</b>	
<b>Licensed US Govt. Agency::</b>	
<b>Contract or Grant Numbers::</b>	
<b>Secrecy Order in Parent Appl.::</b>	

## **Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** U.S.A.  
**Country::** U.S.A.  
**Status::** Full Capacity  
**Given Name::** Chris  
**Middle Name::**  
**Family Name::** CHEN  
**Name Suffix::**  
**City of Residence::** Chino Hills  
**State or Province of Residence::** California  
**Country of Residence::** U.S.A.  
**Street of Mailing Address::** 2396 Scenic Ridge Drive  
**City of Mailing Address::** Chino Hills  
**State or Province of Mailing Address::** California  
**Country of Mailing Address::** U.S.A.  
**Postal or Zip Code of Mailing Address::**

## **Correspondence Information**

**Correspondence Customer Number::** 26694  
**Phone Number::** (202) 962-4800  
**Fax Number::** (202) 962-8300  
**E-Mail Address::** fchao@venable.com

## **Representative Information**

**Representative Customer Number::** 26694

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
N/A	Continuation of		
	Continuation of		
	Continuation of		
	Continuation of		

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
N/A			

### Assignee Information

Assignee Name:: N/A

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::